

PAYMENT AND SIGNATURES FORM for 2002 MNWG SUMMER ENCAMPMENT ON-LINE REGISTRATION

SUBMIT THIS FORM AS SOON AS POSSIBLE AFTER COMPLETING THE ELECTRONIC/ON-LINE REGISTRATION.

CADET NAME: _____ CAPSN: _____ UNIT CHARTER #: _____

RELEASE BY PARTICIPANT

KNOW ALL MEN BY THESE PRESENTS that I am submitting my application for Civil Air Patrol Special Activities or Encampments, and I hereby volunteer entirely upon my own initiative, risk, and responsibility for an assignment to participate in this activity of encampment at the first available opportunity and with full knowledge that such activity may include:

1. Traveling by land, sea, or air in US military, commercial, or privately owned vehicles from regular place or residence to the site of the activity or encampment, travel incident to the activity or encampment, and subsequent return to place of residence.
2. Participation in aeronautical activities as a passenger or student trainee in US military, commercial, or privately owned aircraft.
3. Living for a period of one week or more on diminished rations and minimal shelter simulating actual survival conditions.
4. Being quartered and/or subsisting away from regular or normal place of residence for an extended period of time.
5. Remaining with the cadet group I am assigned to at all times during the activity or encampment.
6. Acting as a spokesman for Civil Air Patrol, rendering reports on the activity or encampment.
7. Refraining from argumentative discussions concerning governmental policies.

In consideration of the permission extended to me by the Civil Air Patrol/United States of America through its officers and agents to participate in said activity/encampment or activities/encampments, I do hereby for myself, my heirs, executors, and administrators release and forever discharge the Civil Air Patrol, Inc./United States of America, and all its officers, agents, and employees acting official or otherwise, from any and all claims, demands, actions, or causes of action, on account of my death or on account of any injury to me or my property which may occur as a result of the negligence of the Civil Air Patrol/United States of America, its agents or employees during said activity/encampment or activities/encampments or continuances thereof, as well as all ground and flight operations incident thereto.

DATE

SIGNATURE OF APPLICANT

RELEASE BY PARENTS OR GUARDIAN

KNOW ALL MEN BY THESE PRESENTS: WHEREBY my child has applied for the activity or encampment referred to above, In consideration of the permission extended to my child by the Civil Air Patrol/United States of America through its officers and agents to participate in said activity/encampment or activities/encampments, I do hereby for myself, my heirs, executors, and administrators release and forever discharge the Civil Air Patrol, Inc./United States of America, and all its officers, agents and employees acting official or otherwise, from any and all claims, demands, actions or causes of action, on account of the death or on account of any injury to my child which may occur as a result of the negligence of the Civil Air Patrol/United States of America, its agents or employees during said activity/encampment or activities/encampments or continuances thereof, as well as all ground and flight operations incident thereto. In addition, by my signature below, I certify the applicant:

1. Is my minor child or ward.
2. Has no history or injury or disease which might be affected by this activity except those previously noted in the Medical Information section of this form.
3. Will follow all rules, regulations, and directives as established by the Civil Air Patrol, Inc., activity project officer or encampment commander, or other staff members. If not following the above mentioned rules, regulations, and directives he/she may be sent home at the discretion of the project officer, encampment commander or activity directory at my expense.

However, in case of injury, disease or other illness, permission is hereby granted to treat the applicant as required, and if the applicant is released from the activity before recovery from said injury, disease, or illness, further treatment will be provided by myself.

DATE

WITNESS FOR FATHER'S SIGNATURE

FATHER OR LEGAL GUARDIAN

WITNESS FOR MOTHER'S SIGNATURE

MOTHER OR LEGAL GUARDIAN

GFAFB HOLD HARMLESS AGREEMENT

It is hereby agreed that I am a voluntary participant in the Civil Air Patrol's Encampment held at Grand Forks Air Force Base, North Dakota, from 15 June to 23 June 2002. I understand that use of this military installation is a privilege and in exchange for using certain facilities on the base, I agree to indemnify and hold harmless the United States Air Force, its members, employees, contractors, and assigns from any suit, claim or damages resulting from my participation in this encampment while on Grand Forks AFB.

Signature of Participant

Signature of Participant's Parent/Guardian (if Participant is under 18)

Date

SQUADRON COMMANDER'S CERTIFICATION

I certify that this cadet has my permission to attend the 2002 Minnesota Wing Summer Encampment, and that he/she will meet the eligibility requirements no later than 01 June 2002.

Unit Commander's Signature

Date

ATTACH A CHECK FOR \$115.00 (\$140.00 IF SUBMITTED AFTER 08 MAY 2002) MADE OUT TO "MINNESOTA WING-CAP"

MAIL THIS FORM TO: MNWG/Encampment Apps, PO Box 11230, St Paul, MN 55111-0230

QUESTIONS? CALL MAJOR TODD MANDEL AT 608-788-3559